

RECEIVED

JUL 27 2010
PIERCE COUNTY
ROAD OPERATIONS

PIERCE COUNTY REPORT OF INCIDENT OR UNSAFE CONDITION
(Do NOT use to report County-owned VEHICLE damage OR County EMPLOYEE INJURIES)

Department PWU - Road Ops Your Department's Risk Management BARS Code: 150.100.6200.54290 .46.0030

Employee Completing Report
Employee Name STEVE McMULLIN
Division, Section, Etc. RD OPS
Work Address CMF Work Phone 253 798 6000

Person Injured/Involved In the Accident or Incident
Name _____ Age _____
Home Address _____ Home Phone _____
Occupation N/A
Employed By: _____ Work Phone _____
What was the involved person doing at the time of accident or incident? _____

Date, Time and Place
Date 7-19-10 Time 2:00 A.M. ☐ P.M. ☒
Location 26320 ENTWHAILE

The Injury
Nature and extent of injury Broken WATER Line
Where was injured taken after accident? _____ Name of Doctor _____
Why was injured on premises? _____

Property Damage or Theft of Property
Owner's Name MARION WATER. GEORGIA Home Phone 360 829 9061
Address _____
List damage: Broken WATERline
Police Case #: _____

Description of Accident, Incident or Unsafe Condition
(Attach additional sheets if necessary.) While DITCHING WITH #750 - I HIT AND BROKE A WATERLINE BELONGING TO MARION WATER (BUCKLEY)
NOTE: WATERLINE WAS AT THE TOP OF DITCHES FLOWLINE
(PICTURES) MIKE ALEXANDER
Locates Required? YES ☐ NO ☒ Locate #: _____

Describe 1st Aid: PARKS - Did person resume skating? YES ☐ NO ☐

Witnesses
Name _____ Address _____ Wk Phone _____ Hm Phone _____

Name _____ Address _____ Wk Phone _____ Hm Phone _____

Date, location and badge # or name of police authority to whom incident was reported: _____

Date 7-19-10 Signature of Employee [Signature] Signature of Department or Agency Head [Signature]

Return completed form to:

PIERCE COUNTY RISK MANAGEMENT
955 Tacoma Avenue South, Suite 303
Tacoma, WA 98402



